NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES	Docket Number (Optional) 27683-011US

	In re Application of Aaron Q. Johnson

Application Number 10/800,742	Filed March 16, 2004

For System And Method For Enabling Identification Of Network Users Having Similar Interests And Facilitating Communication Between Them

Art Unit 2433	Examiner W. J. Goodchild

Applicant hereby **appeals** to the Board of Patent Appeals and Interferences from the last decision of the examiner.

The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) $ 310.00

[x] Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: $ _____

[ ] A check in the amount of the fee is enclosed.

[ ] Payment by credit card. Form PTO-2038 is attached.

[x] The Director has already been authorized to charge fees in this application to a Deposit Account.

[x] The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. ___50-0311___.

[x] A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

WARNING: INFORMATION ON THIS FORM MAY BECOME PUBLIC. CREDIT CARD INFORMATION SHOULD NOT BE INCLUDED ON THIS FORM. PROVIDE CREDIT CARD INFORMATION AND AUTHORIZATION ON PTO-2038.
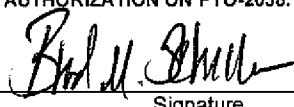
I am the

[ ] applicant /inventor.

[ ] assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

[x] attorney or agent of record. Registration number ___61,022___

[ ] attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____

_____
Signature

Brad M. Scheller, Esq.
_____
Typed or printed name

(212) 692-6761
_____
Telephone number

June 28, 2012
_____
Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

[ ] *Total of ___1___ forms are submitted.